

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>AM</i>		4/11/00
O.I.P.E. CLASSIFIER		10	4-14-00
FORMALITY REVIEW	S.S.	69134	7-7-2000
RESPONSE FORMALITY REVIEW		71622	9-18-00

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 ÷ ..... Restricted      O ..... Objected

Claim	Date
Final Original	
1	10/25/01
2	02/02/08
3	✓
4	✓
5	✓
6	✓
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Claim	Date
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If more than 150 claims or 10 actions  
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